

Employee Spotlight Samantha

Samantha Halstead is a woman who enjoys challenges. In December of 2007 she was presented the Edmonton ICE award for Complex Care for her outstanding efforts and commitment to assisting individuals with complex needs.

Born and raised in Vancouver, Samantha later left British Columbia to explore new opportunities and horizons. She traveled Europe and then returned to Canada to live in Edmonton as a change of pace from the west coast. A previous work experience in Vancouver had triggered an interest in assisting individuals with disabilities so when Samantha spotted a posting on the internet for an opportunity with I.C.E., she thought it "sounded interesting" and applied. Samantha has held several roles within I.C.E. since joining the agency in 2004 including: Day Program staff, Main staff and Team Leader. She has also

worked with individuals across both adult and children's programs.

Samantha has shown a natural aptitude for supporting persons with complex needs since starting with the agency. She reports that she finds it rewarding to help these individuals build success; "To get to know people, and like a puzzle, figure out what works for them." Samantha takes great pride in assisting individuals to achieve day to day successes that help them reach their larger goals.

Outside of work Samantha is a photography and scrap booking enthusiast, who enjoys music, concerts, and travel. At work she continues to grow with the agency by accepting new challenges such as Team Coordinator training which she is scheduled to complete this spring. Samantha presents a wonderful combination of kindness and strength; qualities which her clients and colleagues appreciate and rely on. ICE would like to extend a heartfelt thank you to Samantha for her dedication and hard work.



Vancouver is the largest city in the province of British Columbia. It's surrounded by water on three sides and is nestled alongside the Coast Mountain Range. Vancouver is home to spectacular natural scenery and a bustling metropolitan core, and boasts one of the mildest climates in Canada.

The Greater Vancouver region is home to more than two million people in 21 municipalities, making it the third largest metropolitan area in Canada.

The Olympic Flame will arrive in Vancouver on February 12th, 2010 marking the opening of the Winter Olympic Games. Vancouver will welcome athletes and guests from around the world for the event.

During the Vancouver 2010 Paralympic Winter Games, approximately 600 athletes will compete in four sports and over 50 separate medal events.

**Did you
know?**

ECAT

Employee &
Client Assistance
Team

461-7236

after office
hours



MEETINGS

Health &
Safety Meeting

Wed, March 5, 10:00 AM

Team Leader Meetings

Tues March 18, 1-3 PM

RPAC

Thurs March 6, 2 PM

Thurs March 20, 2 PM



TIME SHEET HAND-IN



Hand-in day will be:

Mon March 17, 2008

for all shifts worked
between
March 1st and 15th
and

Mon March 31, 2008

for all shifts worked
between
March 16th and 31st

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Your Employee Health and Safety Committee

WHAT WE ARE: ICE employees from different areas working together to improve your health and safety on the job.

WHY: increased health and safety cuts down on injuries that hurt you (ouch!) and hurt your company with reduced productivity and expensive insurance coverage.



Health and Safety Representatives appearing in photo: Left to right: Dean Bowles, Robin Ould, Center Front- Noreen O'Donoghue, Center Back – Lorraine Doherty, Debbie Reed, Alice Romanchuk, Corinne Stasiewicz.

If you have any issues or concerns about your own, or another staffs' safety, you are obligated to report it (**ICE policy 3.5.1, and Alberta Occupational Health and Safety Legislation 2(2), 2006**) to your supervisor, a member of the Health and Safety Committee or, in the health and safety box in the front office.

It is also your responsibility to document your issue or concern in the 'Hazard Identification section' of the 'Staff Communication Daily Log pages' if you are a Residential employee so that your co-workers are aware immediately.

HOW: the health and safety committee works to improve your work environment by reviewing injury/illness/near miss investigations, reviewing policy and hazards, and taking action based on these findings, and by bringing forth your concerns to management.

WHEN: the committee meets the first Wednesday of every month at 10:00am in the ICE office (Confirmation is printed each month in the ICE Page). If you are interested in joining the committee or just attending a meeting, please call Corinne at 453- 9672.

WHO:

Current members of the committee are:

Corinne Stasiewicz (Committee Chair) –
Health and Safety Specialist

Brent Busch (co-chair) –
Quality Assurance/Risk Management
Consultant

Noreen O'Donoghue (co-chair) –
163rd Street

Alice Romanchuk – 183rd Street

Roberta Jaggard – Killarney

Robin Ould– 161st Street, Opal

Mary Ann Rain – 161st Street

Lorraine Doherty – 190th Street,
42nd Street

Lucky Jane Santos – Community Support
Coordinator

James Gaitano - Calder

Debbie Reed - Ad Hoc – Manager of
Community Rehabilitation Programs

Muaz Hassan - - Ad Hoc - Quality Assurance/
Risk Management Consultant

ICE Registered Nurses – Ad Hoc

We are always looking for more front line staff to take responsibility for your health and safety!



Find frequently used forms at
www.icenterprises.com

go to the "ICE Staff" section by entering
User name "iceuser" and password "100smiles"

EDMONTON REFERRAL INCENTIVE WINNER

This month we have 2 recipients receiving the ICE referral incentive.

These employees will receive an additional \$50.00 on their pay cheque.

Congratulations to both for their wonderful referrals!

Here is how the Employee Referral Incentive works!

If you refer a person to us who successfully meets our hiring requirements and completes their three month probation with a minimum of 120 hours worked, you will receive \$50.00. Take advantage of this great opportunity.

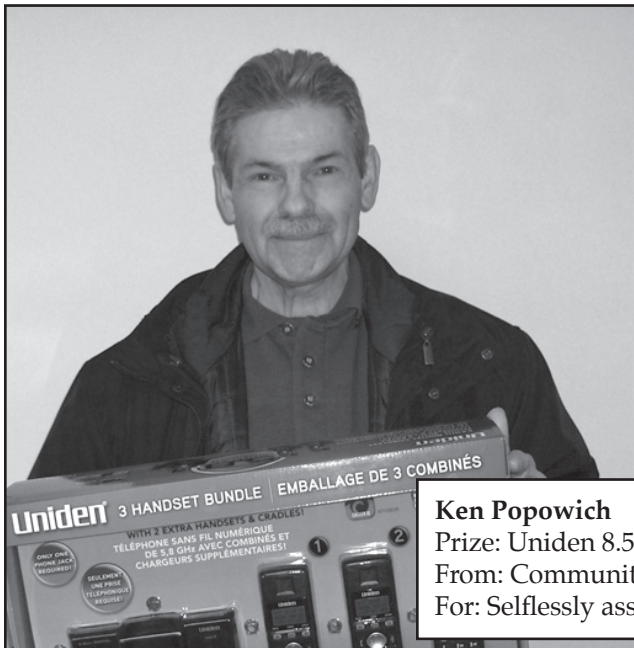
WILL YOU BE ONE OF NEXT MONTH'S FEATURED EMPLOYEES RECEIVING A \$50.00 INCENTIVE PAYMENT?

HAPPY EASTER!



Thank You!

Incentive Thank-you Card Draw Winners

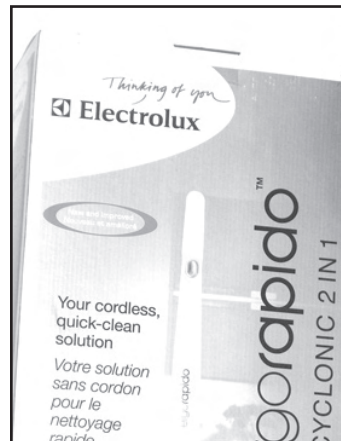


Ken Popowich

Prize: Uniden 8.5 GHz Cordless Phones (set of 3)
From: Community Rehabilitation Manager
For: Selflessly assisted another program's move.

Gashaw Fetene

Prize: Electrolux 2 in 1 Vacuum
From: Booking Coordinator
For: You were more than willing to help out with a shift at the last moment.



Ljubinka Skobic

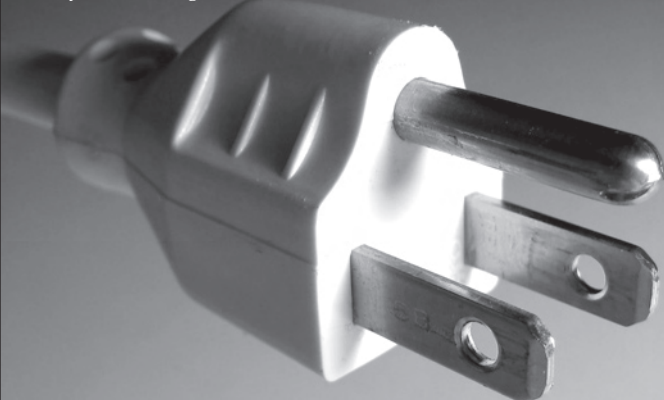
Prize: 7pc. Ceramic Bakeware Set
From: Team Leader
For: Provide our clients with support and caring in such a comforting way

Good Housekeeping is Key to Health and Safety

Whether ICE employees are assisting clients with the development of life skills or supporting individuals who need a higher level of care, good housekeeping is important to every I.C.E. employee. Here's a quick good housekeeping list for review. Remember these items are just as valuable for your own home as for the residential programs you work in:

1. Prevent slips, trips and falls and ensure emergency egress safety by making sure walkways are kept clear. Articles must not be stored where they will block or restrict access to fire escape routes. Inappropriate storage of items or supplies can create tripping hazards and obstructions and increase the risk of fire. Remove obstacles from walkways inside the home and always keep them free of clutter. Secure (tacking, taping, etc.) mats, rugs and carpets.
2. Use extension cords (if required) as little as possible. If you do need to use an extension cord, ensure that it is in good repair, CSA approved, and suitable for the job. Never use an outdoor extension cord indoors, or vice versa. Indoor and outdoor extension cords are designed differently. Improper use could cause a fire. Never place cords under carpeting.
3. Store items safely. As per ICE policy 3.5.8 Standard Hazard Controls, all cleaning supplies are to be kept locked up in an area separate from the food and medications in the home. Keep all combustible materials well clear of home furnaces, water heaters and dryers including exhaust pipes and vents.
4. Check regularly that windows are easily opened, and that clients and workers would be able to quickly and safely climb out of them in an emergency. In winter, windows may frost up or snow may build up outside on lower

Ensure plugs and cords are in good condition and not frayed or damaged.

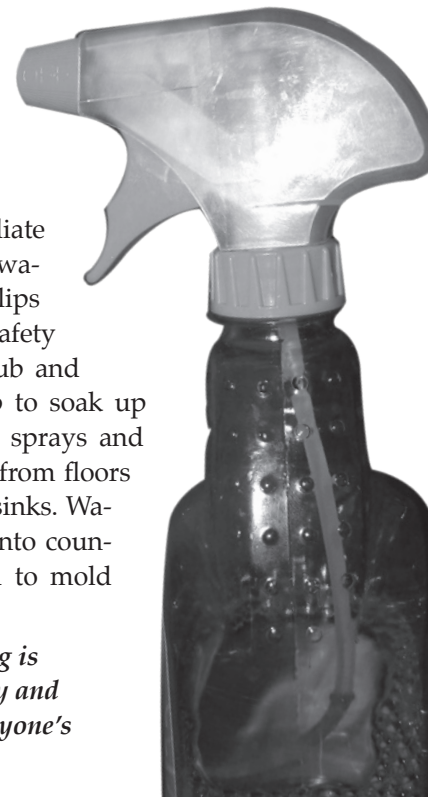


Health & Safety

levels. Window escape routes must be kept clear and operational all year round. Also be sure to have something (chair, stool, dresser, step-ladder etc.) under windows requiring these so that clients/staff can climb on them to reach the window, should they need to escape (Make sure these items are stable so that people can climb them safely.)

5. While doing laundry always remove the lint from the clothes dryer lint trap after every load. Ensure that clients completing or learning to complete their own laundry tasks are also taught this important safety skill.
6. Spills, sprays, and splashes need immediate follow-up. Puddles of water on the floor cause slips and falls. Have a safety bath mat inside the tub and a mat outside the tub to soak up spills. Wipe up water sprays and splashes immediately from floors and around tubs and sinks. Water left sitting creeps into counters etc. and can lead to mold problems.

Good Housekeeping is key to working safely and working safely is everyone's responsibility.



Health Corner

What is Choking?

To understand choking, you first have to understand what goes on at the back of your throat hundreds of times per day. All the food you eat and the air you breathe passes through your throat to get into your body. Food and liquid go down one pipe, the esophagus to your stomach. Air goes down another pipe, the trachea, or windpipe to your lungs. These two pipes share an opening at the back of your throat.

So if you share an opening how does the food know which pipe to go down? Lucky for you, your body has it all under control. A little flap of cartilage called the epiglottis sits near your trachea, and every time you swallow, it springs into action. Acting like a little door, it closes off the entrance to your trachea so that food is sent down your esophagus into your stomach instead of your lungs.

Though every once in a while, the epiglottis doesn't close in time causing an object, like Mike's Smokey down into the trachea. Most of the time, it's no big deal; your body makes you cough and force's it back up.'

You've probably experienced this. Did you ever have a sip of a drink that "went down the wrong pipe"? You probably coughed a lot and it might have been scary, but usually you're fine in just few seconds. That's because coughing is the body's natural defense against stuff that doesn't belong in the trachea. A good cough often can clear out a piece of food or even an object that heads down the trachea. If a person can still breathe and talk, coughing often does the trick.

But when someone is truly choking it means the food or object is completely blocking the trachea and air cannot flow into and out of the lung. The person cannot cough the object out. They can't breathe, talk, or even make noise. They may

CHOKING

Just as Mike took a bite of his Smokey, his friend Dave made a goofy face and it cracked Mike up. But it is hard to laugh and swallow food at the same time. A piece of Smokey slipped down Mike's throat and got stuck. He couldn't breathe; he couldn't make any sounds at all.

At first Dave thought Mike couldn't catch his breath because he was laughing hard. But when Mike started waving his hands and grabbing at his throat, Dave knew his friend was in trouble. He yelled for help.

A staff member rushed over to Mike and performed a technique called the Heimlich maneuver, which caused the Smokey piece to shoot out of Mike's mouth and land good 6 feet away. Gross, yes. But the staff member saved Mike's life.

grab at their throat or wave their arms. If the trachea remains blocked, their face may turn from bright red to blue.

The body needs oxygen to stay alive. When oxygen can't reach the lungs and the brain, a person can become unconscious, sustain brain damage, and even die within minutes. That's what makes choking such a serious emergency.

How Can I Prevent Choking?

Here are four great ways to prevent choking:

1. Be extra careful when eating certain foods that are easy to choke on. They include: hotdogs, nuts, grapes, raw carrots, popcorn, and hard or gooey candy.
2. Sit down, take small bites, and don't talk with your mouth full!
3. Eat softer foods if you have difficulty chewing.
4. Learn the Heimlich maneuver. It's usually taught as part of any basic first aid course.

First Aid for a Conscious Adult

This is reminder for staff who has first aid/ CPR.

Determine if the person is choking

- Ask, "Are you Choking?"

If the person is not choking;

- Encourage person to continue coughing.
- Continue to monitor situation.

If the person is choking;

- Summon someone to can help.
- Give abdominal thrusts
- Wrap your arms around the person's waist.

- Make a fist

- Place thumb side of fist against middle of person's abdomen just above navel and well below the lower tip of breast bone.

- Grasp fist with your other hand.
- Press fist into person's abdomen with a quick upward thrust.
- Each thrust should be a separate and distinct attempt to dislodge the object.

Repeat abdominal thrust until;

- Object is coughed up.
- Person starts to breathe or cough forcefully.

- Person becomes unconscious.

If the person becomes unconscious;

- If not already done, have someone phone 911. If alone, make the call yourself.
- Do a finger sweep.
- Attempt to ventilate. If breaths do not go in, reposition head and try again.
- Give 5 abdominal thrust
- Repeat these 3 steps until effective, or until ambulance or other trained person takes over.

2.2.1 CLIENT RIGHTS AND RESPONSIBILITIES

Independent Counselling Enterprises believes clients have the following rights:

1. The right to independence.
2. The right to be listened to and to self-advocate, or if unable, to have someone advocate on their behalf.
3. The right to be informed about the service provider (agency's policies and procedures that govern service delivery) and the services being provided there by enabling the client to make informed choices to accept or to refuse services (see Policy 2.2.3 Informed Consent).
4. The right to service provision according to the clients needs' and established personal plans not restricted by gender, age, race, creed, religion, sexual orientation or colour.
5. The right to quality service and support

characterized by respect and dignity for the client, recognition of the client's privacy needs, courtesy, competency, punctuality, flexibility, confidentiality and freedom from mental, physical and financial abuse by the service provider.

6. The right to be fully included in the planning, revision or review of their personal plan.
7. The right to be informed of the appeal process and to appeal decisions made by Independent Counselling Enterprises regarding service delivery without fear of reprisal or discrimination.

Independent Counselling Enterprises believes clients have the following responsibilities:

1. The responsibility to actively participate in decisions and to make a commitment

to follow through in all aspects of service delivery.

2. The responsibility to keep agreements made with Independent Counselling Enterprises and its employees.
3. The responsibility to treat Independent Counselling Enterprises employees with respect.
4. The responsibility to express concerns and problem-solve with the employee and to report unresolved issues to the employee's supervisor.
5. The responsibility to ensure financial arrangements for service delivery are met within the specified time lines.
6. The responsibility to promote a safe working environment for both the employees and other clients.

Creating Excellence Together (CET)

As you may have heard we are preparing for a CET survey for certification in June 2008. There are forty-six standards that ICE will be evaluated on. The standards are divided into three areas: Quality of Life Standards, Quality of Service Standards and Organizational Framework Standards.

The Quality of Service standards are linked to the Quality of Life standards. They look at the role of staff who are closest to the individuals, and how those staff support the individual to achieve each of the Quality of Life standards.

The First Six Standards In Quality Of Life Are:

Homes

Standard 1: Individuals have homes

Choices and Decision-Making

Standard 2: Individuals make decisions about everyday matters

Relationships

Standard 3: Individuals have strong, positive relationships

Rights

Standard 4: Individuals are treated with dignity and respect

Standard 5: Individuals' rights are upheld ie: Aware of their rights, offered choice.

Personal Control

Standard 6: Individuals achieve personal control

The First Six Standards In Quality Of Service Are:

Homes

Standard 13: Individual are supported to have homes

Choices and Decision-Making

Standard 14: Individuals are supported to make decisions about everyday matters

Relationships

Standard 15: Individuals are supported in building strong, positive relationships

Rights

Standard 16: Individuals are treated with dignity and respect

Standard 17: Individuals' rights are upheld

Personal Control

Standard 18: Individuals are supported to achieve personal control

Please look at these standards in regards to your clients and talk to your Team Coordinators or CSC with concerns we need to address. We would also appreciate any great examples of meeting the above standards. (ie: contact notes, meeting minutes, log book entries etc.)

Start reviewing your CET Audit tool book and policies now.

It is important that we pass this certification for the overall continued success of the agency.

Any further questions please call: Colette Tancsics @ 453-9825 or email @ ctancsics@icenterprises.com

Please be sure to check your ICE Page every month to find out about training opportunities available to employees. The key to success is constant learning!

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Upcoming Workshops:

Positive Behavior Supports:

April 3, 2008 9AM - 5PM

Documentation:

March 20, 2008 1PM - 5PM

Proactive Behaviour Intervention:

March 6, 2008 9AM - 5PM

March 13, 2008 9AM - 5PM

To register in these workshops, please contact:

Diann at 453-9657, or Shauna at 732-2335

& PROFESSIONAL DEVELOPMENT

Coming soon...

Foundations Training

- Paid Training
- Career Opportunities
- Province-wide Recognition
- Tutoring and Support
- 12 College Credits
- Kick-start your education

For more information, or to register for an upcoming information session, contact Diann at 453-9657 or Shauna at 732-2335

ICE
Independent Counselling Enterprises Inc.



Health & Safety Meeting minutes

2.0 Review the Previous Minutes / Business Arising from Minutes

- Review of Proposed timeliness/timekeeper identification this meeting – Not assigned
- Review of current committee member attendance list / New Committee member follow up / member ID cards / member duo tangs & labels / membership incentives:
- Current member attendance –Noreen and Alice confirmed their intention to continue as committee members. Muaz and Brent will attend alternately. Roberta Jaggard is “on leave” from the committee.
- Inserts needed for: Alice and Noreen. Kelly was provided inserts for her binder.
- Member mugs- Brent attended briefly at the start of the meeting and was presented with his mug.
- New Members- James and Lucky will join the Health and Safety committee
- Review of previous minutes and assigned follow up:

Robin will attend the next Team Leader Meeting on February 20th, 2008 and will review/discuss the following subjects:

- o Winter storm drills – information in Health & Safety Binder
- o Safe Indoor footwear – Foam based shoes (i.e. Dawgs, Croc’s etc.) do not meet required policy standards and should not be worn to work by ICE employees.
- o Cloth laundry bags (or laundry baskets that can be carried with only one hand) are a requirement. (cloth/mesh bags can be purchased at dollar stores)
- o Proper clearing of walkway, remove snow down to paved walk, houses may need to purchase ice chippers to properly maintain sidewalks
- Extra Medications- Brent has contacted Diann L’Hirondelle (ICE Myros Liaison) who is currently awaiting a response from contact Myros on the possibility of extra medications for our clients in case of an emergency or spoiled meds.)
- Update on Fire Safety DVD’s – Corinne and Greg will be creating a teaching plan for use of videos. Members are welcome to view DVD’s. Maryann will be reviewing to provide feedback from a front-line point of view and returning DVD’s to Corinne by Friday February 8th, 2008.
- Update on Lifts and Transfers meeting – A follow- up meeting was held with ICE nurses, booking, training, CR Managers and CSC’s on Feb 4th, 2008. An action plan

has been established and will be followed through by Corinne via office meetings.

- Update on WHMIS training follow up – Regions in process of identifying staff that started their employment with ICE prior to January 1st, 2004 and whether or not these employees received WHMIS training.

3.2 Evaluation of current Injury/Near Miss Investigations

1. Staff went to clear sidewalk, left the door to the home ajar, client became agitated because door was left open (cold). Staff gave client space, matter was resolved.

Door should be closed for client comfort when shoveling walks. If the door was left ajar as staff was alone with clients they should wait until there is a second staff member in home to care for client before going out to shovel walks. Staff to avoid entering power struggles with clients.
2. Two staff and client went on a community outing, stopped at Tim Hortons on the way back to program for staff purchases. Client became angry on drive home as he was not offered treats, threw a book at staff in the front seat. Staff proceeded to take client to the police station to have the police speak with the client.

Staff supports need to anticipate actions that may agitate clients (accessing treats in front of a client) and avoid such actions. Respect client point of view.

Staff should never drive a client while the client is in an agitated state. (After the client was upset and had been aggressive the staff drove him to the police station.) Staff were putting themselves at great risk.

Staff require further training regarding Positive Behavior supports for clients and regarding ICE safety policies and procedures.

3. TL entered home unseen by clients and went downstairs. While downstairs TL heard client being verbally aggressive to weekend staff. Client became agitated and struck weekend staff, TL intervened to restore calm to situation.

Requires follow up re client agitation and aggression. Manager/Coordinator to ensure positive approaches are in place for this client.

4. Injury reported by employee who went shopping for client at Superstore. When finish shopping slipped and fell in parking lot. Employee reported wearing proper footwear.

Recommend that staff persons use a cart for carrying items that may affect their balance (bags of groceries) or sight of hazards especially under slippery conditions. Staff

persons need to employ extreme caution when traversing icy surfaces.

3.4 Review of COR Audit

Reviewed Pg. 8 – General Overview continued to

Pg. 9 Executive Report

Key Recommendations:

- Many workers still believe the policy is located in the health and safety binder, ensure everyone is aware of the recent change. (Refer them to Policy Man.)

Clarification of policy location to be addressed at Team Meetings, TL Meetings, and during PET training.

- Need to review “employee responsibilities” and general content of the health and safety policy and with all staff. Could consider reminding workers of their health and safety responsibilities when signing terms of employment

Annual Reviews, Team Meetings During signing of employment terms.

- Increase awareness of the president’s commitment to health and safety through memo’s, the ICE page, or at annual awards ceremonies

Utilize the website, newsletter articles, multimedia presentations on hand-in days.

Visits by Senior Management

Train CSC’s and Managers to complete contractor agreements.

Train program staff at Team meetings to provide effective contractor orientations including: site specific hazard control document, confidentiality, identification, office contact, recording procedures etc.

- Increase awareness of senior management’s presence in the worksites through feedback to the teams and notes in the communication log book
- Have all contractors complete contractor agreements and ensure that they receive an orientation to the worksite before beginning work.
- Improve sign in- out procedures in the office as this is still problematic. New “visitor badge system” has been implemented. Recommend evaluating new visitor badge system to determine if this has enhanced sign out effectiveness. Explore - instructors signing out training participants.

4.3 Fragrance Use

All members are requested to refrain from wearing perfume or aftershave to H&S meetings.